



## REQUEST FOR STOP SIGN

APPLICANT MUST COMPLETE ALL PORTIONS OF THIS APPLICABLE SECTION BEFORE THE REQUEST CAN BE CONSIDERED BY THE TRAFFIC SAFETY COMMITTEE.

<b>REASON FOR REQUEST:</b>	<input type="checkbox"/> <b>HIGH ACCIDENT RATE</b>	<input type="checkbox"/> <b>HIGH TRAFFIC VOLUME</b>	<input type="checkbox"/> <b>DESIGNATED SCHOOL CROSSING</b>	<input type="checkbox"/> <b>POOR VISIBILITY</b>	<input type="checkbox"/> <b>OTHER</b>
LIST THE INTERSECTION AND DIRECTION TRAFFIC IS REQUESTED TO STOP					
<b>DIRECTION OF TRAFFIC</b>	<b>STREET TO STOP AT</b>	<b>CROSS STREET</b>			
LIST IF / WHEN POLICE WERE NOTIFIED: _____					
COMMENTS: _____					

- 1.) Stop signs are intended to assign right-of-way at an intersection.
- 2.) Many people believe that forcing motorists to stop at each intersection will decrease overall speed.
- 3.) Most motorists accelerate between intersections to make up for the time lost at stop signs.
- 4.) Inappropriate installation of extra stop signs may cause additional problems such as more rear-end collisions.
- 5.) By following the appropriate steps prior to installing stop signs, their use, and location may reduce accidents and properly regulate traffic through an area. Improper signing and ignoring the warrants creates dangerous conditions for both motorists and the responsible Municipality.

**Person Making Request / Spokesperson:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone #: \_\_\_\_\_

Return Completed Form To: Village of Evergreen Park  
 Attn: Traffic Safety Committee  
 9418 S Kedzie Ave  
 Evergreen Park, IL 60805

Use the reverse side of this form to obtain signatures from residents on the block who agree with your request.

